

NOTICE OF INTENT TO WED APPLICATION

SPOUSE 1

Full Name:

Street Address:

City:

State:

Zip Code:

County You Live In:

Date of Birth:

Father's Last Name (Optional)

Father's First
Name (Optional)

Mother's Maiden Name
(Optional)

Mothers's First
Name (Optional)

Social Security Number:

Phone
Number:

SPOUSE 2

Full Name:

Street Address:

City:

State:

ZIP CODE:

County You Live In:

Date of Birth:

Father's Last Name (Optional):

Father's First
Name (Optional)

Mother's Maiden Name
(Optional):

Mother's First
Name
(Optional):

Social Security Number:

Phone
Number: